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FEB 17 2005

Fax

To: Mail Stop AMENDMENT From: Mikio Ishimaru
Examiner Nitin Parekh

Fax: (703) 872-9306 Pages: 3, including this page
TC 2811 - Before Final

Phone: (571) 272-1663 Date: February 17, 2005

Re: U.S. Patent Application Serial CC:
No. 10/773,716

☒ Response/Amendment to Office Action ☐ Information ☐ Other

IMPORTANT

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Signature

Asha Zahrt
Typed or printed name of person signing Certificate

With reference to serial number 10/773,716, the following are being submitted:

- Fax Cover Sheet with Certificate of Transmission
- Transmittal for Enclosures
- Response to Restriction Requirement

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Docket No.: 27-011

PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of: Seng Guan Chow et al.

Confirmation No.: 8312

Serial No.: 10/773,716

Examiner: Nitin Parekh

Filed: Feb 5, 2004

Group Art Unit: 2811

For: SEMICONDUCTOR PACKAGE WITH
PASSIVE DEVICE INTEGRATIONSEMICONDUCTOR PACKAGE WITH
PASSIVE DEVICE INTEGRATION

TRANSMITTAL FOR ENCLOSURES (check all that apply)		
<input checked="" type="checkbox"/> Response / Amendment	<input type="checkbox"/> Assignment Papers (for an Application)	<input type="checkbox"/> After Allowance Communication to Group
<input type="checkbox"/> After Final	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input type="checkbox"/> Affidavits/Declaration(s)	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Petition	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Terminal Disclaimer	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Information Disclosure Statement, PTO Form-1449, & cited Reference(s)	<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> Petition to Convert to a Provisional Application	• Fax Cover Sheet with Certificate of Transmission
<input type="checkbox"/> Response to Missing Parts/Incomplete Application	<input type="checkbox"/> Request for Refund	
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	Remarks	

The fee, if required, has been calculated as shown below:

	NO. OF CLAIMS	HIGHEST PREVIOUSLY PAID FOR	EXTRA CLAIMS	RATE	FEE
Total Claims	24	24	0	x \$50 =	\$ 0.00
Independent Claims	4	4	0	x \$200 =	\$ 0.00
If multiple claims newly presented, add \$300					
Fee for extension of time					
Other:					
TOTAL FEE					\$0.00

- ☐ Please charge Deposit Account No. 50-0374 in the amount of \$ 0.00. An additional copy of this transmittal sheet is submitted herewith.
- ☒ The Commissioner is hereby authorized to charge payment of any fees associated with this communication or credit any overpayment, to Deposit Account No. 50-0374, including any filing fees under 37 CFR 1.16 for presentation of extra claims and any patent application processing fees under 37 CFR 1.17.

Respectfully submitted,

*Mikio Ishimaru*Mikio Ishimaru
Registration No. 27,449
Date: February 17, 2005

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Docket Number: 27-011

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Patent

FEB 17 2005

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Inventors: Seng Guan Chow et al.

Confirmation No: 8312

Application No.: 10/773,716

Examiner: Nitin Parekh

Filed: 2/5/2004

Group Art Unit: 2811

Title: SEMICONDUCTOR PACKAGE
WITH PASSIVE DEVICE
INTEGRATIONSEMICONDUCTOR PACKAGE
WITH PASSIVE DEVICE
INTEGRATIONMail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria VA 22313-1450RESPONSE TO RESTRICTION REQUIREMENT

Sir/Madam:

In response to the Office Action of February 9, 2005, wherein restriction has been required, Applicants respectfully elect Claims 1-12 with traverse and without waiving any rights for reconsideration. Claims 13-24 are to be held in abeyance for preparation of a divisional application in the event reconsideration is denied. Applicants respectfully request reconsideration of the requirement for restriction and that the requirement be removed.

☒ No additional fee is required

At any time during the pendency of this application, please charge any fees required or credit any overpayment to Deposit Account 50-0374 pursuant to 37 CFR 1.25.

Respectfully submitted,

Mikio Ishimaru
Mikio Ishimaru
Reg. No. 27,449
February 17, 2005

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CERTIFICATE OF MAILING/TRANSMISSION (37 C.F.R.1.8a)

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February 17, 2005

Signature

Asha Zahrt
Asha Zahrt

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